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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 380201.00002

First Named Inventor Wiesemann et al.

COMPLETE IF KNOWN

Application Number 10/566,930

Filing Date 02 February 2006

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ERGONOMIC FISH TAPE

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 06 Aug 04 (06.08.04)

as United States Application Number or PCT International

Application Number PCT/US04/025510 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:

Customer Number
or Bar Code Label

26710

OR ☐

Correspondence address below

Name WIETRZNY, Steven J. , QUARLES & BRADY LLP

Address 411 E. Wisconsin Avenue

Address

City Milwaukee

State WI

ZIP 53202

Country US

Telephone 414-277-5000

Fax 414-271-3552

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :



A petition has been filed for this unsigned inventor

Given Name

David L.

(first and middle [if any])

Family Name Wiesemann
or SurnameInventor's
Signature

Date

3-30-06

Residence: City Pewaukee

State WI

Country US

Citizenship US

Mailing Address 484 Laurelwood Court

Mailing Address

City Pewaukee

State WI

ZIP 53072

Country US

NAME OF SECOND INVENTOR:



A petition has been filed for this unsigned inventor

Given Name

David A.

(first and middle [if any])

Family Name Huebschen
or SurnameInventor's
Signature

Date

Residence: City Menomonee Falls

State WI

Country US

Citizenship US

Mailing Address N79 W16218 Longwood Street

Mailing Address

City Menomonee Falls

State WI

ZIP 53051

Country US

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Express Mail Label No.

Please type a plus sign (+) inside this box



PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page ____ of ____

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

**Inventor's
Signature**

Date

Residence: City

State

Country

Citizenship

Mailing Address

Mailing Address

City

State

ZIP

Country

Name of Additional Joint Inventor, if any:

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Given Name (first and middle [if any])

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Signature**

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Given Name (first and middle [if any])

Family Name or Surname

**Inventor's
Signature**

Date

Residence: City

State

Country

Citizenship

Mailing Address

Mailing Address

City

State

ZIP

Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/SB/01 (10-01)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	380201.00002
	First Named Inventor	Wiesemann et al.
	COMPLETE IF KNOWN	
	Application Number	10/566,930
	Filing Date	02 February 2006
	Group Art Unit	
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PTO/SB/01 (10-01)

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	26710	OR	<input type="checkbox"/> Correspondence address below
Name WIETRZNY, Steven J., QUARLES & BRADY LLP					
Address 411 E. Wisconsin Avenue					
Address					
City Milwaukee		State WI		ZIP 53202	
Country US		Telephone 414-277-5000		Fax 414-271-3552	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR :			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name David L. (first and middle [if any])			Family Name Wiesemann or Surname		
Inventor's Signature			Date		
Residence: City Pewaukee		State WI		Country US	
Mailing Address 484 Laurelwood Court		State WI		Country US	
City Pewaukee		ZIP 53072		Country US	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name David A. (first and middle [if any])			Family Name Huebschen or Surname		
Inventor's Signature 			Date 10/23/06		
Residence: City Menomonee Falls		State WI		Country US	
Mailing Address N79 W16218 Longwood Street		State WI		Country US	
City Menomonee Falls		ZIP 53051		Country US	
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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